AC 4692
14/12

County of Ross and Cromarty

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE

Year 1952

C O N T E N T S

	Page
BIRTHS	3.
BLIND PERSONS	28.
BOVINE TUBERCULOSIS	34.
BUILDING LICENCES	35.
BURIAL GROUNDS	32.
CARE OF MOTHERS AND YOUNG CHILDREN	8.
CHILDREN'S ACT 1948	29.
CHILD MINDER'S REGULATIONS	24.
CHILDREN'S OFFICER'S REPORT	29.
DEATHS	3,4,5.
FACTORIES	32,43.
FOOD AND DRUGS	35,36.
GENERAL SANITATION	30,41.
HOME HELP	14,28.
HOSPITALISATION OF INFECTIOUS DISEASE	23.
HOUSING SERVICES	34,35,41,42.
HOME NURSING	14.
HEALTH VISITING	13.
ICE CREAM REGULATIONS	35,43.
IMMUNISATION	15,16.
INFANTILE MORTALITY	9.
INFECTIOUS DISEASES	18 to 22, 43.
LABORATORY	23.
MARRIAGES	3.
MATERNAL MORTALITY	10.
MATERNITY BEDS	12.
MENTAL HEALTH	23,24.
MIDWIFERY	10.
MILK AND DAIRIES	32,33,42.
MILK OFFICER'S REPORT	39.
NATIONAL ASSISTANCE ACT 1948	26,27.28.
NUISANCES	31,42.
OFFENSIVE TRADES	32.
PLANNING	36.
PREVENTION OF ILLNESS, CARE AND AFTERCARE	16,17.
POPULATION	3.
PORT HEALTH ADMINISTRATION	25.
REPORT ON LOCAL AUTHORITY SERVICES	26.
SANITARY INSPECTORS' REPORTS	30,41.
SCHOOL SERVICES	25.
SEAFORTH CHILDREN'S HOME	24.
SLAUGHTERHOUSES AND MEAT INSPECTION	25.
TUBERCULOSIS SERVICES	22.
VACCINATION	15.
VITAL STATISTICS	3,4,5.
WATER SUPPLIES	30,41.
WATER ENGINEER'S REPORT	44.
WELFARE OFFICER'S REPORT	27,28.

TO: The Department of Health for Scotland
and the County Council
of Ross and Cromarty.

Ladies and Gentlemen,

I herewith present the Annual Report on the Health and Sanitary conditions of the County for the year ending 31st December, 1952.

I am,
Yours faithfully,

J. LANDESS HORNE

MEDICAL OFFICER OF HEALTH.

Public Health Department,
DINGWALL.

INTRODUCTION

From the following report it will be noted, that in 1952, as in previous years, diseases of the heart and blood vessels yielded the greatest number of deaths, while cancer of various parts of the body ranked second. Influenzal pneumonia, so virulent in 1951, practically disappeared in 1952, while scarlet fever increased in incidence as the year progressed, eventually becoming widespread throughout the Mainland. In the infectious diseases sphere, there was also noted a case of leptospiral jaundice, the first ever notified in the area and as a result of this discovery, a check on the leptospiral state of 100 rats trapped in the area was carried out by the Public Health Department in conjunction with the Laboratory at Raigmore Hospital, Inverness.

As regards tuberculosis, a welcome fall in the mortality figure for Lewis in comparison to previous years is noted, but an unfortunate equivalent rise has occurred on the Mainland.

The nursing service for the area is still taxed to its maximum and when accurate statistics are collected, the committee will be in a better position to judge the future nursing needs of the County as a whole. The role of the District Nursing Sister as a Health Visitor in her own area is considered of vital importance to preventive medicine in the County, and her availability as such is dependent upon her not being completely tied down by purely nursing duties.

A brief note is incorporated on the Report of the Standing Advisory Committee on Local Authority Services. This report draws attention to the lack of appreciation of the importance of the work carried out by Local Authorities in respect of preventive medicine and the need for closer co-operation between the separate parts of the National Health Service. No exception can be taken to the general truths expressed in this document, but, from a Medical Officer's point of view, it is felt that, this insistance on the importance of preventive medicine and co-ordination by those in authority centrally, must be viewed with a certain amount of reservation, since although consultants and general practitioners are fully represented on Regional Hospital Boards, in the northern area, no Medical Officer so far, has been appointed to the Northern Regional Board, although the area comprises the whole of the North of Scotland and since such appointment is within the power of the Secretary of State. This omission does create a feeling of unreality in the minds of Public Health doctors when it is considered that practically every branch of curative medicine is related in some way or other to the duties of Medical Officers of Health.

During 1952, Mr. P.A. Marshall, who was at one time Clerk to the Medical Officer of Health, died. Mr. Marshall came to Ross-shire prior to the first world war, and became shortly afterwards Clerk to the National Insurance Committee and to the then Medical Officer of Health. Mr. Marshall guided successive Medical Officers through the intricies of Public Health administration and in the field of general practice many young doctors had also cause to be grateful for his help and assistance.

When/

When the National Health Service came into being, Mr. Marshall relinquished his post as Clerk to the Medical Officer of Health in order to take over greater responsibilities in the new Service, but at heart he was still part of the Public Health Department, and he never relinquished his loyalty to it. His sudden and unexpected death was a sad blow, terminating not only a sympathetic professional relationship but also a close friendship which had developed and strengthened since my appointment as Medical Officer of Health to Ross-shire in the early years of the last war. Mr. Marshall belonged to the "old order" of Public Health, now gone, but the memory of him will always be fresh in the minds of those doctors in Ross-shire who had the pleasure of knowing him.

I would like to thank all members of the Public Health staff for their co-operation and assistance during the year under review.

VITAL STATISTICS

Estimated Population by the Registrar-General to middle of June 1952 60,300

The estimated population shows a decrease of 510 compared with the estimated population for 1951.

BIRTHS

The births in the County Landward and in the Small Burghs during 1952 (including illegitimate 60) after correction for transfer was 1,018 (males 506 females 512) (uncorrected figure 917) compared with 1,010 in 1951.

STILL BIRTHS

20 babies (12 males and 8 females) were still born compared with 23 in 1951 (14 males and 9 females).

BIRTH RATES

Live birth rate (corrected for transfer)	16.9 per 1,000 estimated population.
Illegitimate birth rate	5.9 per 100 live births.
Still birth rate	19.0 per 1,000 total births.

ALL SCOTLAND

Birth rate	17.7
Still birth rate	26.0

MARRIAGES

During the year the total number of marriages in the County was 263 giving a rate of 4.4 per 1,000 of estimated population, compared with 240 in 1951 with a rate of 3.9.

DEATHS

The number of deaths in the County Landward and in the Small Burths (corrected for transfer) was 879, of whom 417 were males and 462 females, compared with 930 in 1951.

DEATH RATES

Deaths (all causes)	14.6 per 1,000 Estimated Population.
Death-rate Tuberculosis (all causes)	0.33 " " " "
Death-rate Tuberculosis Respiratory system	0.27 " " " "
Infantile Mortality	24.00 " " Live Births.

ALL SCOTLAND

Death-rate all causes	12.00
" " Tuberculosis all causes	0.32
" " " Respiratory system	0.27
Infantile Mortality	35.00

DEATHS 1952.

	Deaths Registered	As corrected		
		Males	Females	Total
Cromarty	5	5	3	8
Dingwall	47	21	18	39
Fortrose	13	5	7	12
Invergordon	11	6	16	22
Tain	20	6	20	26
Stornoway	108	35	33	68
Remainder of County	596	339	365	704
Whole County	800	417	462	879

AGES AT DEATH.

Age Groups	CROMARTY	DINGWALL	FORTROSE	INVERGORDON	TAIN	STORNOWAY	REMAINDER OF COUNTY	TOTAL
Under 1	1	2	-	1	-	3	17	24
1 - 4	-	1	-	1	-	-	6	8
5 - 9	-	-	-	-	-	-	4	4
10 - 14	-	-	-	-	-	1	5	6
15 - 24	-	-	-	-	-	-	13	13
25 - 34	1	1	-	-	-	1	11	14
35 - 44	-	1	-	-	1	2	23	27
45 - 54	-	4	-	2	2	4	28	40
55 - 64	2	6	1	3	-	6	69	87
65 - 74	2	4	3	7	5	16	171	208
75 - 84	2	16	4	5	13	25	240	305
85 and over	-	4	4	3	5	10	117	143
ALL AGES	8	39	12	22	26	68	704	879

CAUSE OF DEATH (Corrected for Transfer) - Whole County

	CROMARTY	DINGWALL	FORTROSE	INVERGORDON	TAIN	STORNOWAY	REMAINDER OF COUNTY	TOTAL FOR 1952.
Tuberculosis of respiratory system	1	1	-	-	1	1	12	16
Tuberculosis, other forms	-	1	-	-	-	-	3	4
Syphilis and its sequelae	-	-	-	-	-	-	-	-
Typhoid Fever	-	-	-	-	-	-	-	-
Dysentery, all forms	-	-	-	-	-	-	-	-
Scarlet Fever and Streptococcal Sore Throat	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-
Whooping Cough	-	-	-	-	-	-	-	-
Meningococcal Infections	-	-	-	-	-	-	1	1
Acute Poliomyelitis	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	-
Other infections and parasitic diseases	-	-	-	-	1	-	1	2
Malignant neoplasms	2	7	3	3	1	7	90	113
Benign and unspecified neoplasms	-	-	-	-	-	-	1	1
Diabetis mellitus	-	-	-	1	1	2	5	9
Anaemias	-	-	1	-	-	-	5	6
Other general diseases	1	1	-	-	-	1	9	12
Vascular lesions affecting central nervous system	-	9	-	4	6	16	97	132
Nonmeningococcal meningitis	-	-	-	-	-	1	1	2
Other diseases of nervous system	-	-	-	-	-	-	13	13
Rheumatic fever	-	-	-	-	-	-	-	-
Chronic rheumatic heart disease	-	1	-	-	-	2	5	8
Arterioselerotic and degenerative heart disease	1	10	2	5	6	16	208	248
Other diseases of heart	-	-	-	-	-	-	18	18
Hypertension with heart disease	-	-	-	1	1	1	23	26
Hypertension without heart disease	-	1	-	1	1	2	18	23
Other circulatory disease	-	1	-	-	4	2	19	26
Influenza	-	1	-	-	-	-	-	1
Pneumonia	-	1	1	-	1	2	22	27
Bronchitis	1	1	-	1	-	2	16	21
Other respiratory diseases	-	-	-	-	-	1	5	6
Ulcer of stomach and duodenum	-	-	-	1	-	2	9	12
Appendicitis	-	-	-	-	-	-	-	-
Intestinal obstruction and hernia	-	-	-	-	-	-	2	2
Gastritis and duodenitis	-	-	-	-	-	-	-	-
Diarrhoea (except of New Born)	-	-	-	-	-	1	2	3
Cirrhosis of liver	-	-	-	-	-	-	3	3
Other diseases of liver	-	-	-	-	-	-	2	2
Other digestive diseases	-	-	-	-	-	-	1	1
Nephritis and nephrosis	-	1	-	-	-	1	8	10
Hyperplasia of prostate	1	1	-	1	-	2	6	11
Other diseases of genito-urinary system	-	-	-	-	-	-	1	1
Puerperal sepsis including post abortive sepsis	-	-	-	-	-	-	1	1
Other puerperal causes	-	-	-	-	-	-	-	-
Diseases of skin and organs of locomotion	-	-	-	-	-	-	3	3
Congenital malformations	1	-	-	-	-	1	3	5
Birth injuries, post natal asphyxia and atelectasis	-	-	-	-	-	1	4	5
Pneumonia of newborn	-	-	-	-	-	-	-	-
Diarrhoea of newborn	-	-	-	-	-	-	-	-
Other infections of the newborn	-	-	-	-	-	-	-	-
Other diseases peculiar to early infancy	-	1	-	1	-	-	2	4
Senility	-	-	5	2	3	1	37	48
Cause ill-defined and unknown	-	-	-	-	-	1	10	11
Suicide	-	-	-	-	-	-	2	2
Motor vehicle accidents	-	-	-	-	-	-	8	8
Other road transport accidents	-	-	-	-	-	-	-	-
Other violence (BE 50)	-	1	-	1	-	2	28	32
ALL CAUSES	8	39	12	22	26	68	704	879

NATIONAL HEALTH SERVICE (SCOTLAND) ACT, 1947.
LOCAL HEALTH AUTHORITY SERVICES.

1. Administration.

As in previous years, the duties of the Local Authority under the National Health Services (Scotland) Act, have been carried out by the staff of the Public Health Department, centred in Dingwall and Stornoway. The professional staff is as follows -

Whole County

Dr. J. Landess Horne M.D., Ch.B., D.P.H.
County Medical Officer.

Lewis

Dr. R. Stevenson Doig M.B., Ch.B., D.P.H.
Deputy Medical Officer.

D.S. Ross L.D.S., R.C.S.
School Dentist.

Miss Margaret Morrison R.G.N., S.C.M., H.V.Cert.
Supervisor of Nurses.

Mainland

Dr. C. Forguson M.B., Ch.B.
School Medical Officer
and Assistant Medical Officer.

J.S. Cochrane L.D.S., R.C.S.
School Dentist.

Miss Mary Morrison R.G.N., S.C.M., H.V.Cert.
Supervisor of Nurses.

Both in Dingwall and in Stornoway there is a definite shortage of accommodation for staff and at the present time there does not appear to be any likelihood of these conditions improving.

As regards clerical staff, this has remained constant in number since the inception of the Act, although just prior to this, the post of part-time clerk to the Medical Officer of Health, held by the late Mr. P.A. Marshall, became vacant and was not filled. Permission was given by the committee to replace the post by a fulltime junior clerkess, but this so far, has not been done.

Except that on the Mainland, Dr. Forguson is principally occupied in School Medical Inspection, the Medical Staff have no specialised duties, but are responsible for the carrying out of all the functions for which the Public Health Department is responsible.

2. Co-ordination and co-operation with other parts of the National Health Service.

Under Section 30 of the National Health Service (Scotland) Act, the Local Authority were given powers to contribute to expenditure on co-ordination of the various interests brought into being under the Act. As in other areas, a Local Advisory Co-ordinating Committee was formed, consisting of representatives of the three main bodies, i.e. the Local Authority, the Executive Council and the Hospital Authority. Originally the Local Authority was the body that called together the committee but subsequently it was delegated to the Executive Council to do so, if and when they thought fit.

So/

So far only a small number of meetings have been held and as a result of these, the general impression left is, that they have failed to accomplish their object and that initially anyway, co-ordination and co-operation on any subject, is really a matter for the individuals working in the service concerned, rather than for committees, and that the committee stage on any subject, should be the last stage before seeking the final approval of the main authorities for the action contemplated.

That close co-operation by the Public Health Authority with the General Practitioner service is an essential basis for sound preventive medicine has been recognised by the Ross-shire County Council in their decision to invite all practices in the area to be linked with the Public Health Department as Local Assistant Medical Officers of Health.

This post has no specific duties attached to it but is covered by the general duty to keep the Medical Officer of Health informed of all medical matters which are considered to be his responsibility and to help and advise in their own practices in all matters relating to the prevention and spread of infectious diseases.

At the time of writing, all practices are so linked with the Public Health Department and apart from the assistance given in connection with infectious diseases, various family doctors throughout the County have assisted in the tuberculin testing of children, the B.C.G. vaccination of children, the investigation of the epidemiology of poliomyelitis and influenza, the searching out of tuberculosis and V.D. contacts, the inspection of debilitated children, and in numerous other matters where the responsibilities of both family doctor and Medical Officer touch or overlap.

Contact with the Hospital authorities is in the main in connection with tuberculosis and infectious diseases and is on a personal basis between the doctors concerned. The Public Health Department is greatly indebted to both the County Hospitals at Stornoway and at Invergordon for their ever willing assistance in matters which concern both departments and although originally misgivings were felt at the loss to the Local Authority of these Institutions, much of the difficulties which could have arisen, have failed to do so because of this close co-operation.

As regards co-operation with the specialists, other than those responsible for the Sanatoria and Infectious Disease Hospitals, it has been found that when assistance has been requested from them, this has always been willingly given.

In a rural County, such as Ross-shire, the general practitioner is the main link between all the services and the public and it is through him that the people as a whole are kept informed of the various services from which they can expect assistance when this is required. If in doubt, the family doctor contacts the Medical Officer of Health who if he is unable to immediately give the information desired, endeavours to obtain it and pass it on, as soon as possible.

The District Nursing Sisters also link up the various services, being employed by the Local Authority but carrying out their various nursing duties under the General Practitioners of the area. In the case of patients being discharged from hospital, to be nursed at home, the accepted procedure is that the family doctor receives a note of the hospital's instructions and he in turn advises the nurse concerned.

3. Joint use of Staff.

As mentioned above, all General Practitioners in the area act as Local Assistant Medical Officers of Health. As well as this Dr. A. Matheson, Stornoway, acts as part-time Assistant Medical Officer of Health, relieving Dr. Doig during holidays and in illness.

In/

In certain areas the family doctors collect at their surgeries, children whom they desire the Medical Officer of Health to see for various reasons, i.e. debility, B.C.G. vaccination, or for the discussing with parents matters relating to their children. This arrangement has saved a great deal of time and travelling as well as allowing the Medical Officer of Health opportunity for consultation with his colleague in general practice.

Although there is no fixed arrangement between the Hospital Board and the Local Authority for the joint use of staff, nevertheless there is a close linking of the hospital at Invergordon and the Public Health Department, whereby, in an emergency or the like, each would assist the other. This is a personal arrangement based upon the close identity of interest of both medical staffs for the care of tuberculosis and infectious disease patients.

Apart from this, the Medical Officer of Health attends all tuberculosis clinics where there is a checking up of domiciliary patients and is also afforded scrutiny of all X-ray films on request.

4. Care of Expectant and Nursing Mothers and children under school age.

(a) Expectant and nursing mothers. During the year under review, as in previous years, practically all the expectant mothers in the area were cared for ante-natally by their family doctor in conjunction with the district nursing sister, only a small percentage of women being directly supervised by the hospital authorities although they had booked for their confinement to take place in hospital. This is easily understood when it is considered how much travelling may have to be undertaken for a simple examination which can be readily carried out by the family doctor.

An attempt is being made by the obstetricians to insist upon antenatal care at the hospital clinics (Inverness, Dingwall) before "booking" will be allowed, but it is doubtful if coercion will appreciably alter the percentage of women attending antenatal clinics from outlying areas. In certain instances the obstetricians do see patients at the family doctors' own consulting rooms, mainly on the west coast of the County.

The District Nursing Sisters, who also act as Health Visitors in their own areas, advise mothers on routine nursing matters and also give out maternity bundles, free to all women who are to have their baby at home. In the case of unmarried mothers, it is usual to give, when applied for, a free layette and also to notify the Children's Officer of such cases that require her assistance in the matter of the adoption of the child. Such children to be adopted, are usually cared for temporarily at the Seaforth Children's Home, Maryburgh.

Since the commencement of the operation of the National Health Act, this part of the Service appears to have worked smoothly and few difficulties have arisen.

(b) Child Welfare. No fixed Child Welfare clinics are operated in the County by the Local Health Authority on account of the scattered nature of the population, but the Medical Officer of Health has, during the year under review, seen children in collaboration with General Practitioners, both at their surgeries and in the homes of the children concerned. Some thought has been given to the question of child welfare and as to how the responsibilities of the Local Authority can be linked to the interests of the family doctor, and to this end, by the end of 1952 preliminary arrangements had been made for an experiment to be carried out in one part of the County, whereby the District Nursing Sisters' Child Welfare cards would be transmitted to the family doctor concerned and he or his assistant would endeavour to see all of these children once a year.

As/

As a result of his inspection, the doctor would be able to make further arrangements for the supervision of any ailing child and wherever necessary, notify the Medical Officer of Health of cases requiring his attention. The doctors will carry out the experiment in the joint capacity of family doctor and Local Assistant Medical Officer of Health. As stated above, the scheme is experimental and its object is to try and find a method of knitting closer together the General Practitioners' responsibilities and that of the Medical Officer of Health for the care of children in a rural area. If it is found that such a knitting together is a practicable proposition, an endeavour will be made to extend the scheme to other areas.

(c) Care of Premature Infants. Under the County Council's scheme for the above, special provisions have been made for the domiciliary care of premature infants, but so far these provisions have not been used, as the usual procedure in such cases is for the child to be retained in the maternity hospital until such time as it can be sent home with safety. In certain instances, where home conditions are unsuitable, the infant is, on discharge from the hospital, admitted to the Seaforth Children's Home and retained there as long as its condition warrants it, in light of its home circumstances

Premature children, born at home are usually admitted to hospital and there after dealt with as stated above. So far there has been no difficulty in having these children cared for and the hospital authorities have given every co-operation in the matter.

(d) Supply of Dried Milks, etc. Throughout the County, District Nursing Sisters co-operate with the Ministry of Food in the issuing of dried milk, orange juice etc. for the infant population. Apart from this, extra nourishment may be obtained through the Medical Officer for unmarried mothers where it is considered by the practitioner in charge, that such is necessary for the health of the mother and child.

(e) Dental Care. As regards the dental care of pre-school children and expectant mothers it would appear that the availability of free dental treatment under the National Health Service has, on the whole, made superfluous, a similar availability under the Local Authority's services, except in cases where dentures are required to be supplied.

On the Mainland, during the summer months, clinics were held at certain villages but in spite of the publicity given to these visits, attendances were extremely few. In Lewis, a certain number of cases were dealt with at Stornoway, but there also the demand is limited. It is intended to continue endeavouring to popularise this part of the Local Authority's services.

Infant Mortality

The number of deaths of infants under 1 year of age (corrected) was 24 (15 male and 9 female) giving an infant mortality rate of 24 per 1000 live births as compared with a figure of 31 per 1000 live births in 1951 (total deaths 31) and an all Scotland figure of 35 deaths per 1000 live births.

When it is considered that the Infant Mortality rate in 1943 was 58, the 1952 figure of 24 appears satisfactory, but scrutiny of the causes of these deaths does suggest that a further reduction of at least 30% is within the bounds of possibility.

Causes of Death

Meningitis (Meningococcal)	1
Meningitis (Non-meningococcal)	1
Pneumonia	4
Disease of the skin etc.	1
Congenital Malformations	4
Birth Injuries etc.	5
Accidents	3
Causes ill-defined and unknown	1
Other Diseases peculiar to infancy ..	4
TOTAL	24

5. Domiciliary Midwifery.

The general trend for expectant mothers to have their babies in hospital continues. Of a total of 917 births occurring in the County during 1952, over 50% (474 births) were so located.

Both as regards hospital and domiciliary midwifery, practically every expectant mother is under her family doctor for ante-natal and post-natal care. Of the domiciliary cases, it is a rarity for a woman to book only with the nurse and not also with the doctor. During the year under review no such exceptional case occurred and hence all cases were directly under their own doctors, assisted by the nursing sister of the area concerned. This dual arrangement, of doctor and nurse, is in keeping with the policy of the Public Health Department, that all expectant mothers should be under the care of a doctor and that no nurse should accept readily, any woman not so under this supervision, except where it cannot be avoided.

Forty seven District Nursing Sisters have now their certificate for the giving of gas and air analgesia and such analgesia was given by them in 145 cases. This figure refers only to the nurse's administration of gas and air and does not include other analgesics given by the doctor in attendance on the case in the presence of the nurse.

As regards the admission of expectant mothers to hospital, an arrangement has been come to between the Medical Officer of Health and the Hospital Authorities whereby the Public Health Department, will assist in the selection of cases whose admission to hospital is recommended on social grounds, at such times as accommodation is insufficient for all who desire admission. Fortunately, so far there has been no need for such selection to take place, all cases recommended, being admitted, without the necessity of reference to the Public Health Department. It is of interest here to note, that in 1939, the number of cases dealt with in the Ross Memorial Hospital was approximately 20, while now this hospital deals with between 350 to 400 cases a year, and could probably accommodate more, if organised to do so.

Except for the training of nurses in the use of gas and air analgesia, no nurse was sent during 1952 for a refresher course in midwifery. The reason for this is the lack of suitable courses and the difficulty of obtaining relief nurses, to staff the vacant area in the interval. That nurses should be sent on refresher courses is fully realised by the Health Authority but in an area where District Nursing Sisters carry out all nursing duties and doctors are in attendance on all expectant mothers, the sending of nurses on refresher courses on general lines, rather than on midwifery alone, is probably the better policy.

Maternal Mortality.

There was 1 maternal death during 1952 as against 3 in 1951.

Midwifery. (Section 23)

(i) Total number of birth occurring in the area during year - that is before correction for mother's residence:- Live Births 896. Still Births 21. Total 917.

(ii) Total number of births in (i) occurring in institutions (including private maternity homes) 474.

(iii) Total number of births in (i) occurring at home 443.

(iv)/

(iv) Number of births in (iii) classified to show nature of attendance at birth:-

(1)	Cases dealt with under Section 23(2) of the National Health Service (Scotland) Act, 1947. /			Other domiciliary cases.				
	Doctor engaged and present at confinement (2)	Doctor engaged and not present at confinement (3)	Midwife alone (no doctor engaged) (4)	Doctor and Midwife engaged (5)	Midwife alone (no doctor engaged) (6)	Without doctor or midwife (7)	All other cases (8)	Total (9)
(a)Midwives employed by the Authority(including those engaged on a fee-per-case basis)	296	98	-	-	-	-	-	394
(b)Midwives employed by Voluntary Organisations under arrangements made by the Authority	39	6	-	-	-	-	-	45
(c)Midwives employed by Hospital Boards of Management under arrangements made by the Authority with the Regional Hospital Board	-	-	-	-	-	-	-	-
(d)Private practising midwives	-	-	-	4	-	-	-	4
(e)Other cases not classified above	-	-	-	-	-	-	-	-
(f)Total	335	104	-	4	-	-	-	443

/ Including those cases in which no prior arrangements had been made for the confinement, but where midwifery services were provided by the Local Health Authority free of charge. Column (5) and (6) include only those cases attended privately, the mother being responsible for the midwife's fee.

(v) Medical Aid.

(a) Number of cases in which medical aid was summoned during the year under Section 14(i) of the Midwives (Scotland) Act, 1951, by a midwife:-

(i) for Domiciliary cases ..... Nil.)
(ii) for Institutional cases ..... Nil.) Total .... Nil.

(vi)Administration of Analgesics.

(a) Number of domiciliary midwives in the area, qualified to administor gas and air analgesia in accordance with the requirements of the Central Midwives Board for Scotland (including superintendents, non-medical supervisors of midwives, midwife teachers, midwives employed by the local health authority and by voluntary organisations, private practising midwives, and hospital midwives undertaking domiciliary cases under arrangements made by the local health authority and the Regional Hospital Board but excluding pupil midwives undergoing training on the district -
Total .... 47.

(i) No. in (a) employed in local health authority work ..... 47.
(ii) No. in (a) not " " " " " " ..... Nil.

(b)/

(b) Number of domiciliary midwives who received their training during the year Total .... Nil.

(c) Number of sets of apparatus for the administration of gas and air, in use at 31st December 1952 -

(i) By domiciliary midwives, employed by the Authority, or employed by Voluntary Organisation in the Authority's area (including those in use by hospital midwives undertaking domiciliary cases) Total .... 42.

(ii) No. in use by domiciliary midwives not employed the Authority Total .... Nil.

(d) Number of sets on order at 31st December, 1952. Total .... Nil.

(e) Number of cases in which gas and air was administered by midwives in domiciliary practice during the year (including cases attended by hospital midwives undertaking domiciliary cases) -

(i) When doctor was not present at delivery ..... 37.

(ii) When doctor was present at delivery ..... 108.

Total .... 145.

(f) Number of cases in which pethidine was administered by midwives in domiciliary practice during the year (including cases attended by hospital midwives undertaking domiciliary cases) -

(i) When doctor was not present at delivery ..... 33.

(ii) When doctor was present at delivery ..... 191.

Number of Cars in use by midwives at 31st December, 1952 - Total .... 48.

Number of Maternity Beds in Area

Lewis Hospital, Stornoway -

Beds - Maternity - 5.

Total Beds - 63.

All under charge of Regional Board Doctors.

Ross Memorial Hospital, Dingwall -

Beds - Maternity - 17.

- Total Beds - 45 also 17 cots.

All under charge of Regional Board Doctors.

Cottage Hospital, Cromarty -

Beds - Maternity - 5.

- Total Beds - 10.

Maternity only. Nursing staff for 5 cases only. Beds under direct charge of General Practitioners.

No Hospital "under control of obstretrician but General Practitioners allowed to visit".

6./

6. Health Visiting.

Both Supervisors of Nurses employed by the County Council, have their Health Visitor's Certificate, but their duties are in the main that which their designation implies, rather than actively engaged Health Visitors and the routine health visiting of the area is carried out by the District Nursing Sisters. Although there are obvious advantages in having fulltime Health Visitors, there are many disadvantages and nothing has occurred since the inception of the Health Service to alter the belief that the general policy of having only one nurse in an area carrying out all duties, is preferable to having two or three doing specialised duties over a wider area.

The main disadvantage of the combined arrangement, is that during periods of increased demand for the nurse's services for the care of the sick or for maternity work, routine health visiting duties have to be curtailed as a matter of necessity. This disadvantage will decrease as more nurses become available and districts become smaller.

As mentioned elsewhere in this report, there is a close co-operation between the General Practitioner of the area and the Nursing Sisters, in all nursing matters, including health visiting. Co-operation with the hospital authorities is usually via the patient's own doctor and the hospital concerned.

During 1952, visits paid under the heading of Health Visiting, totalled approximately 33,000. Where a nurse is carrying out combined nursing duties, she may be at a difficulty in deciding under what heading her visit should be classified, in spite of guidance from the Nursing Supervisors. Hence there occurs from area to area, fluctuations between totals for such visits and also fluctuations from year to year.

As in previous years, visits paid during the year under review were in respect of, among other things, immunisation, tuberculin testing, B.C.G. vaccination, tuberculosis visitations, contact finding and other matters relating to the personal services of the Public Health Department.

Details of these cases are tabulated below -

	Visits paid by Health Visitors (or by District Nurses in their capacity as Health Visitors) during the year to -										
	Expectant Mothers *		Children under 1 year of age		Children between the ages of 1&5		Tuberculosis Cases		Other Cases		Total Visits Paid
(1)	No. Visited (2)	Total Visits (3)	No. Visited (4)	Total Visits (5)	No. Visited (6)	Total Visits (7)	No. Visited (8)	Total Visits (9)	No. Visited (10)	Total Visits (11)	(12)
Health Visitors employed by the Authority	644	4,444	1,032	8,897	2,903	9,313	369	1,398	1,346	8,770	32,822
Health Visitors employed by Voluntary Organisations	59	258	76	348	120	220	7	7	2	3	836

Note:- These visits do not include visits paid by a midwife-health visitor, who is to attend the confinement as a midwife or maternity nurse.

7./

7. Home Nursing.

During 1952 the Local Authority employed directly, a total of 53 District Nursing Sisters (Mainland 30 Lewis 23) for the carrying out of all nursing duties in the area. As well as those, there were utilised the services of the nurse employed by the Stornoway District Nursing Association. This arrangement worked satisfactorily as did the arrangement with the County of Sutherland whereby the Nursing Sister at Bonar Bridge carried out all nursing duties in that part of Ross-shire stretching from Edderton to the northern boundary with Sutherlandshire.

The number of visits paid under this section was approximately 95,000 for the whole County, being about 5,000 less than in 1951, about the same as for 1950. The absence or presence of epidemic diseases, such as influenza and the like, materially influences the total number of visits paid in any one year, and as noted in the section on vital statistics, 1951 was a year of high incidence of influenza.

Although the most of nursing duties in the various areas are carried out in the homes of the patients, in all areas there are a certain number of treatments etc. carried out at the nurse's own dwelling, and it is customary now, when a District Nursing Sister is allocated a new house, to set aside one room as a treatment room and for the County to make a financial adjustment with the nurse in respect of use of this accommodation.

(1)	Number of Cases attended by District Nursing Sisters under arrangements made under this Section. (2)	Number of Visits paid by District Nursing Sisters to these cases. (3)
District Nursing Sisters employed directly by the Authority	7,068	93,789
District Nursing Sisters employed by Voluntary Organisations	95	1,769

By the end of the year under review, 48 cars were in use in connection with the nursing services of the County. From experience gained, it is becoming more obvious, that for certain areas of the County, light low-powered vehicles are not good investments and that moderately powered cars of substantial construction, although initially more expensive, are wiser investments, standing up better to the hill roads and the vagaries of adverse weather conditions. The health of the nurse also benefits by having a warm and reliable mode of conveyance, an important point in the nursing care of a district.

8. Domestic Help.

This scheme is operated through the County's Welfare Officer and is mentioned by him elsewhere in this report. Although use of the scheme is limited due to scarcity of personnel, it does serve a useful purpose in areas where Home Helps are available.

There are no facilities in the area for the training of persons in this type of service.

9./

9. Vaccination and Immunisation.

(a) Vaccination. Except when there is a threat of smallpox in the area, the Public Health Department does not itself carry out vaccination against this disease, all such vaccination being done by the doctors of the families concerned. On the Mainland, over the last number of years, an endeavour has been made to send a reminder of the need for vaccination to each household with a child of one year of age, in the form of a birthday greeting suggesting vaccination.

Although doctors may send notification, within specified periods of time, of vaccinations carried out by them, for which a fee is paid, not all doctors do so and it is not possible from such notifications to get an accurate estimate of the number of children so dealt with during any one year, but it is found that each "smallpox scare", as it comes along, contributes appreciably to periodic increases which are noted from time to time in this prophylactic procedure.

The total number of vaccinations recorded in the County during 1952 was 627 (Mainland 487 Lewis 140) of which over 75% were primary vaccinations.

No. of Persons Primarily Vaccinated during Period.				No. of Persons Re-vaccinated during Period.			
Typical Vaccinia greatest at 7th-10th day	Accelerated (vaccinoid) Reaction 5th-7th day	Reaction greatest at 2nd - 3rd day	No Local Re-action	Typical Vaccinia greatest at 7th-10th day	Accelerated (vaccinoid) Reaction 5th-7th day	Reaction greatest at 2nd-3rd day	No Local Re-action
396	19	36	91	47	2	4	32

(b) Diphtheria Immunisation.

During 1952, a total of 880 children were known to have been immunised against diphtheria, of these, 843 were so immunised for the first time. These figures are considered to fall short of the total number of children actually dealt with, for as in the case of smallpox vaccination, not all children so immunised are notified to the Medical Officer of Health.

Diphtheria immunisation is, on the whole, mainly carried out by the Public Health Department, especially in respect of boosting doses. This is carried out at clinics, held in the various schools in the districtsbut on account of the scattered nature of the population and limitation of available staff, these clinics can only be held at periodic intervals, depending upon, among other things, the season of the year. On the whole it is considered that the majority of children in the County are satisfactorily immunised against diphtheria and the lack of any confirmed case of this disease, during the last five years, proves the efficacy of the measures taken.

The birthday greeting card sent out in respect of smallpox vaccination also contains reference to immunisation against diphtheria, and no doubt this method of recalling to parents the need for the procedures, does have its effect.

Diphtheria Immunisation 1952./

Diphtheria Immunisation 1952.

Year of birth of persons	Number of children who completed a full course of immunisation during year ended 31st December, 1952.	Number of maintenance inoculations given during year ended 31st December, 1952.
1952	13	-
1951	203	1
1950	148	2
1949	76	1
1948	65	4
1947	122	12
1946	111	5
1945	28	2
1944	15	1
1943	15	-
1942	15	1
1941	7	-
1940	7	-
1939	4	-
1938	11	1
1937 or earlier	3	7
TOTAL	843	37 TOTAL .. 880

(c) Whooping-cough.

Ross-shire was probably the first County in Britain to offer free immunisation against whooping-cough. This was done some years prior to the National Health Service (Scotland) Act, 1947 and since then, better and improved vaccines have come on the market. There is no doubt that the use of this prophylactic vaccine does reduce the severity of the disease in a high proportion of cases, although it may not completely prevent disease by the virus concerned.

As in the case of vaccination against smallpox and immunisation against diphtheria, the total number of children dealt with, is unknown, but 510 children (Mainland 291, Lewis 219), so treated, have been notified to the Medical Officer of Health during 1952, the children concerned being mainly in pre-school age group.

10. Prevention, Care and After-Care.

(a) Tuberculosis. Although the tuberculosis statistics for Lewis during 1952 showed a definite improvement from that of previous years, the Health Committee continued to give consideration to the question of the use of mass radiography on the island, and to this end were frequently in touch with the Department of Health, Edinburgh on the subject. By the end of the year it was decided that a mass radiography unit would visit the island but the final decision as to the type of machine to be used and its method of utilisation had not been arrived at. The matter is still under consideration.

In considering the question of the prevention of tuberculosis, it would be more than rash to hold the attitude that one specific preventive measure, in itself will eradicate the disease. As stressed in previous reports, the prevention of tuberculosis is a complex matter, have ramifications in all aspects of our social life and must be approached on a broad basis, using all the available resources of Medicine and Public Health, including the personnel employed in these services.

Generally/

Generally speaking, in Ross-shire, the searching out of contacts and their supervision is a matter for the Public Health Department, there being no delegation, or intention of delegation of these functions to the Regional Hospital Board.

In Lewis there is an arrangement between the Chest Physician and the Deputy Medical Officer of Health, whereby the former, when he investigates a new case, also investigates the contacts, subsequently informing the Deputy Medical Officer of Health of the results of his investigations.

On the Mainland the Public Health Department searches out all contacts, keeps a record of these and notifies them when to attend at the "contact clinics" specially arranged at the County Hospital, Invergordon by Dr. Cordiner for this purpose. Dr. Cordiner in turn informs the Medical Officer of Health of the results of his examinations and also the names of individuals whom he considers should be directly under his supervision. These latter cases are then removed from the list of contacts held by the Health Department, although they may be replaced on it at a subsequent date, should they be considered no longer "suspects".

On the Mainland also, the Medical Officer of Health attends at all the tuberculosis check-up clinics, arranges for the tuberculin testing of contacts and their B.C.G. vaccination when desired. He also issues sputum containers for the examination of spits and informs the family doctor and the Chest Physician of all results. The Chest Physician in turn, also keeps the Medical Officer informed of the clinical condition of all patients he has seen and sends intimation when he considers them fit for work or unfit enough to warrant the patient's return to Hospital. He also allows scrutiny of all X-ray films on request and keeps the Medical Officer informed on all matters concerning tuberculosis in the district, coming to his knowledge, which he considers of interest to the Public Health Authority of the area. This co-operation is reciprocated by the Public Health Department.

There is also co-operation between the two services in the checking-up of school leavers as regards the exclusion of chest disease.

Extra nourishment in the form of milk, eggs etc., is given in certain cases to tuberculosis patients, usually on the request of the patient's family doctor. The demand is low, because in most cases the patients are in receipt of special benefit from the National Assistance Board.

With regard to the arrangements for B.C.G. vaccination, this continues as in previous years, the Medical Officer of Health, tuberculin testing and carrying out the vaccinations. Except in the Lewis, where B.C.G. is offered to all who want it and require it, vaccination is mainly given to contacts, school leavers and children whose parents, for various reasons, desire it to be carried out.

Speaking generally, it is felt that the integration of this part of the National Health Service has progressed steadily since its inauguration and that it will so continue to do so as time passes.

Group	Tuberculin tested		Negative re-actors		Vaccinated	
	M.	F.	M.	F.	M.	F.
	(1)	(2)	(3)	(4)	(5)	(6)
(1) Nurses	-	30	-	8	-	8
(2) Medical Students	-	-	-	-	-	-
(3) Contacts	66	69	47	49	47	49
(4) Special Groups not included in (1) to (3) above:-						
(a) School Leavers	104	136	22	22	18	14
(b) New Born Babies	4	1	4	1	4	3
(5) Others	657	567	421	327	157	129

11. Control of Infectious Diseases.

The accompanying tables detail the notification of Infectious Diseases in the area during 1952

Scarlet Fever, which each year, produces a number of cases, became much more prevalent towards the latter part of the year under review.

Acute Infective Jaundice, not previously notified in the area, was noted in one instance during the same period.

Poliomyelitis. Five cases (Mainland) were notified in 1952 (4 cases 1951, 9 cases 1950). None of these cases were severe and all made a fairly good recovery. In spite of the fear that 1952 might show an increased incidence of the disease, the period passed without this being realised. Nevertheless, knowledge of the factors that influence this infection to reach epidemic proportions, is limited and as long as sporadic cases occur in the area, the danger of an epidemic is ever present.

Pneumonia (acute influenzal). There were four cases notified during 1952 (4 Mainland 0 Lewis). None of these were hospitalised. There was one death, as against 28 deaths during 1951, a remarkable difference between the two years.

Pneumonia (acute primary). A total of 74 cases (Mainland 71, Lewis 3) were notified during 1952, compared with 75 cases (Mainland 71, Lewis 4) in the previous year. The number of deaths (27) from this type of pneumonia did not differ very much from the number (25) occurring in the previous year.

Diphtheria. As in 1951, there was no case of this disease.

Dysentery. No case was notified during 1952 and only seven cases in 1951. It is felt that this disease is endemic in the community and that many local outbreaks occur in the year, but because of its mildness, these have been considered as simple enteritis, the patient recovering rapidly and not requiring detailed investigation which would reveal the nature of the pathogenic organism concerned.

Scarlet Fever. One hundred and forty eight (148) cases were notified during the year under review (Lewis 7, Mainland 141). The figure for the previous year was 31 (Lewis 1 Mainland 30). The cases concerned came from all over the County, including Duncraig Castle School. This rise in incidence is in keeping with the trend of the disease to have a high periodic incidence and to be sporadic between these periods. Although 148 cases may be considered to be a large number, it is felt that many other cases did occur, but because of the mildness of their symptoms, were not recognised as such. Apart from this, widespread streptococcal throat infections were noted in the population as a whole. This also a feature of "Scarlet Years".

There were no deaths, but as it is impossible to gauge to what extent permanent heart damage results from this infection, it is felt that all recognised cases should be hospitalised and given treatment immediately.

Cerebrospinal Fever. Five cases were notified during 1952 (4 in 1951) of these, one died. This disease, once absent from the County, appears to be now endemic in the area, each year producing its quota of sporadic cases.

Puerperal Pyrexia. One case was notified during 1952. The patient in question died in hospital.

Paratyphoid Fever. Three cases (Lewis 1, Mainland 2) of this disease were notified to the Medical Officer of Health during the year under review. They were all considered to have picked up their infection outwith the area.

Infective Jaundice. One case of this disease was noted in the Eastern part of the County during 1952. As a result of this, approximately one hundred rats from throughout the area, were examined by Dr. Williams, Bacteriologist at Raigmore Hospital.

As/

RETURN OF CASES OF INFECTIOUS DISEASES NOTIFIED DURING YEAR ENDED 31st DECEMBER 1952.

Number of cases coming to the knowledge of the Medical Officer of Health.

MAINLAND

Disease	At All Ages	All Ages - Years								Removed to Hospital	Not removed to Hospital
		Under 1	1 - 5	5 - 15	15 - 25	25 - 35	35 - 45	45 - 65	65 +		
Cerebro-Spinal Fever	5	1	2	1	-	-	1	-	-	5	-
xChickenpox	-	-	-	-	-	-	-	-	-	-	-
Cholera	-	-	-	-	-	-	-	-	-	-	-
Continued Fever	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-	-	-	-
Encephalitis Lethargica	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	3	-	-	-	-	-	-	2	1	-	3
Jaundice, Acute Infective	1	-	-	-	-	-	-	1	-	1	-
Malaria	-	-	-	-	-	-	-	-	-	-	-
xMeasles	-	-	-	-	-	-	-	-	-	-	-
Ophthalmia Neonatorum	1	1	-	-	-	-	-	-	-	-	1
Plague	-	-	-	-	-	-	-	-	-	-	-
Pneumonia, Acute Influenzal	4	-	-	-	-	-	-	2	2	-	4
Pneumonia, Acute Primary	71	8	9	11	3	4	7	13	16	36	35
Pneumonia (not otherwise notifiable)	-	-	-	-	-	-	-	-	-	-	-
Poliomyelitis, Acute	5	1	1	-	1	1	-	1	-	5	-
Puerporal Fever	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	1	-	-	-	1	-	-	-	-	1	-
Scarlet Fever	141	-	46	74	19	1	1	-	-	136	5
Smallpox	-	-	-	-	-	-	-	-	-	-	-
Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid A.	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid B.	2	-	1	-	-	-	-	1	-	2	-
Typhus Fever	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	23	6	8	9	-	-	-	-	-	6	17
ALL CAUSES	257	17	67	95	24	6	9	20	19	192	65

x Not notifiable.

RETURN OF CASES OF INFECTIOUS DISEASES NOTIFIED DURING YEAR ENDED 31st DECEMBER 1952.

Number of cases coming to the knowledge of the Medical Officer of Health.

ISLAND OF LEWIS

Disease	At All Ages	All Ages - Year								Removed to Hospital	Not removed to Hospital
		Under 1	1 - 5	5 - 15	15 - 25	25 - 35	35 - 45	45 - 65	65 +		
Cerebro-Spinal Fever	-	-	-	-	-	-	-	-	-	-	-
xChickenpox	-	-	-	-	-	-	-	-	-	-	-
Cholera	-	-	-	-	-	-	-	-	-	-	-
Continued Fever	-	-	-	-	-	-	-	-	-	-	-
Diphtheria	-	-	-	-	-	-	-	-	-	-	-
Dysentery	-	-	-	-	-	-	-	-	-	-	-
Encephalitis Lethargica	-	-	-	-	-	-	-	-	-	-	-
Erysipelas	5	-	-	-	1	1	-	3	-	-	5
Jaundice, Acute Infective	-	-	-	-	-	-	-	-	-	-	-
Malaria	-	-	-	-	-	-	-	-	-	-	-
xMeasles	-	-	-	-	-	-	-	-	-	-	-
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-	-	-
Plague	-	-	-	-	-	-	-	-	-	-	-
Pneumonia, Acute Influenzal	-	-	-	-	-	-	-	-	-	-	-
Pneumonia, Acute Primary	3	-	-	-	-	1	1	1	-	1	2
Pneumonia,(not otherwise notifiable)	-	-	-	-	-	-	-	-	-	-	-
Poliomyelitis, Acute	1	1	-	-	-	-	-	-	-	-	1
Puerperal Fever	-	-	-	-	-	-	-	-	-	-	-
Puerperal Pyrexia	-	-	-	-	-	-	-	-	-	-	-
Scarlet Fever	7	-	1	6	-	-	-	-	-	1	6
Smallpox	-	-	-	-	-	-	-	-	-	-	-
Typhoid Fever	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid A.	-	-	-	-	-	-	-	-	-	-	-
Paratyphoid B.	1	-	-	1	-	-	-	-	-	1	-
Typhus Fever	-	-	-	-	-	-	-	-	-	-	-
Whooping Cough	35	3	15	15	1	-	-	1	-	-	35
ALL CAUSES	52	4	16	22	2	2	1	5	-	3	49

x Not notifiable.

DISEASES NOT NOTIFIABLE

In addition to the notified cases treated in Hospital (Mainland) the following cases of non-notifiable diseases were also treated in Hospital.

Asthma	1
Bronchitis	25
Bronchiectasis	1
Chickenpox	3
Cellulitis	1
Cervical Adenitis	1
Cystitis	1
Erythema Nodosum	1
Fibrosis of Lungs	1
Fibrositis	1
Gastritis	1
Gastro-enteritis	9
Glandular Fever	2
Granuloma of Neck	1
Haematemisis	1
Haemoptysis	1
Hodgkin's Disease	1
Infectious Hepatitis	3
Influenza	7
Lymphocytic Choreo Meningitis	1
Marasmus	4
Measles	12
Meningismus	1
Myositis	1
Observation	9
Other Cases	5
Pleurisy	13
Pleural Effusion	2
Ringworm	1
Rubella	13
Stomatitis	1
Tonsillitis	7
Vincent's Angina	2
TOTAL	134

As a result of this investigation, it was found that approximately 40% of the rats examined were carriers of Leptospira which causes this severe form of jaundice. It was also noted that in certain areas, the rats had a higher degree of infection among them in comparison to rats caught in areas nearby. This feature has been noted in other parts of the Country.

The case mentioned above, is the first to be notified in this County, although others have probably occurred but have not been recognised as such.

Whooping Cough. During 1952, 58 cases (Lewis 35, Mainland 53) were notified, as against 103 cases (Lewis 71, Mainland 52) during 1951. There were no deaths.

Diseases not notifiable. A total of 133 cases of various infections and other conditions were admitted to the County Hospital, Invergordon for diagnosis and treatment. As in previous years, the Medical Officer of Health is greatly indebted to Dr. Cordiner, Medical Superintendent of the Hospital, Dr. Nicol, Junior Hospital Officer and Miss Cowie, Matron for their unfailing assistance and co-operation in matters where the responsibilities of the Public Health Department and the Hospital Authorities coincide or overlap.

Tuberculosis. The following tables show the number of cases of tuberculosis notified in the County during 1952, and also the number of deaths occurring during that period. The corresponding figures for the year 1951 are also given.

Notifications

AREA	1952		1951	
	Respiratory	Non Respiratory	Respiratory	Non Respiratory
Mainland	65	13	40	17
Lewis	55	5	64	9
County	120	18	104	26

Deaths

AREA	1952		1951	
	Respiratory	Non Respiratory	Respiratory	Non Respiratory
Mainland	12	2	8	3
Lewis	6	-	13	4
County	18	2	21	7

LEWIS. It is noted in respect of Lewis, that the number of notifications for respiratory disease has decreased from 64 in 1951 to 55 in 1952, and that the non-respiratory figure has decreased from 9 in 1951 to 5 in 1952.

As regards the number of respiratory deaths, these have fallen from 13 in 1951 to 6 in 1952, and the non-respiratory deaths from 4 in 1951 to nil. in 1952, an all over total decrease of 11 deaths. Of the six respiratory deaths, 1 was female and 5 male.

The above figures reveal an important improvement in respect of the mortality in this disease in Lewis but as mentioned in previous reports, the total figures dealt with are small and it is therefore necessary not to accept any one year's figures by themselves except with certain reservations. Nevertheless the figures do indicate an improved trend but the figures for the next few years will verify this or not.

MAINLAND. On the Mainland during 1952 there was an increase in both notifications and deaths in respect of respiratory disease. The respiratory notifications numbered 65 as against 40 in 1951 and deaths numbered 12 as against 8 in 1951. Of the 12 respiratory deaths on the Mainland, 4 were in respect of females and 6 in respect of males.

Non/

Non-respiratory notifications numbered 13 during the year under review as against 17 in the previous year. Deaths numbered 2 as against 3 in the previous year.

There has been a increase in respiratory deaths on the Mainland over the last two years. It is difficult to attribute this to a true increase in the incidence of the disease, but rather to a delay in the death rate, due to modern drug treatment, prolonging life in certain cases, which, prior to such treatment, would have succumbed earlier to their infection.

Hospitalisation of Infectious Disease. On the Mainland and also in the Lewis, there has been a fairly rapid admission to hospital of all new cases of tuberculosis, except in respect of cases awaiting surgery. Here, due to lack of beds in the surgical unit at Aberdeen, there is, in most cases, a waiting period of six months or more. This is unfortunate, as in some cases admission may not be effected before a setback has taken place, a setback which might preclude permanently, full recovery. As well as this, those cases have to be retained in hospital until their surgical treatment is carried out, thereby occupying beds which could be utilised for other patients, at present at home.

As regards beds for infectious diseases cases. On the Mainland, all cases considered by the Medical Officer to require hospitalisation, have been admitted but in the Lewis some scarlet fever cases are still retained at home. This is contrary to the policy of the Public Health Department, which, as indicated previously, is that all cases of scarlet fever should be hospitalised.

Laboratory Service. As in previous years, the Public Health Department is indebted to all branches of the Laboratory Service for their co-operation and assistance, which has been freely given whenever requested.

The following are the number of specimens examined in relationship to Public Health matters.

Number of Specimens

	1951	1952
Sputa for Tuberculosis	2,118	1,359
Faeces for Enteric etc.	101	114
Bloods for Syphilis	289	301
Milk Examinations	532	704
Milk Examinations (G.Pig)	28	82
Ice Cream	30	43
Water samples	21	30

12. Mental Health. (See also Welfare Officer's Report)

(i) Administration. The Mental Health Service for the County is administered by the Welfare Committee as a delegation from the Public Health Committee. This arrangement has, since the inauguration of the service, worked smoothly and efficiently.

There is no special psychiatry staff employed, the Chief Welfare Officer and his eight deputies all acting as authorised officers, co-operating with the Medical Officer of Health and the General Practitioners of the County. These officers also co-operate with the Regional Hospital Board, supervising, on its behalf, those patients who are home on trial or licence. There is no delegation of duties by these officers to any voluntary associations in the area. The County has no scheme for the training of workers in this type of work.

(ii) Account of work undertaken in the community.

(a) Under Section 27, National Health Service (Scotland) Act, 1947, the Local Authority may make special provision for the prevention of mental illness, but the scattered nature of the population involved and the indefiniteness of what may be considered as specific preventive measures, has/

has so far militated against any scheme being formulated. Nevertheless, the authorised officers do assist and advise, whenever their attention is drawn to individuals who may be considered to require their assistance under this section of the Act.

(b) Under the Lunacy (Scotland) Acts 1857-1866, when the attention of the authorised officers is drawn to persons who may be considered to require to be dealt with under the above Acts, the authorised officers arrange for the individuals concerned to be seen by the nearest general practitioners, with a view to certification. If certification is carried out, the officer concerned, then arranges for an ambulance to convey the patient to hospital, and in certain instances, he also accompanies the patient to hospital in the ambulance. The latter is done on behalf of the Hospital Authorities.

(c) Under the Mental Deficiency and Lunacy (Scotland) Acts 1913-1940, here, as above, the authorised officers, in conjunction with the school medical officer and the school psychologist, arrange for the ascertaining of mental defectives, and thereafter carry out the necessary supervision.

In most instances these cases are put under the guardianship of a relative, and in only one instance is the guardianship in other than in this relationship.

So far, there are no arrangements locally for the institutional provision of training of these persons but where work is carried out at home under the supervision of the guardian, it may be considered as occupational therapy and materials supplied by the Welfare Committee. There is at present, under consideration, a scheme for the training of handicapped persons, and an endeavour will be made to make provision for persons handicapped mentally.

13. Work Under Nurseries and Child-Minders' Regulation Act.

Since these Regulations have come into force, no application for registration has been received.

Seaforth Home.

During the year under review, the accommodation at this Home was fully utilised. In the early part of the year, both staff and children were affected by an outbreak of influenza which was predominately respiratory in nature, but responded rapidly to treatment. Once this outbreak was over, the rest of the year passed uneventfully in this respect.

As in the previous year, the lack of playroom accommodation was found to be a great handicap, but by the end of the year the Committee had well under way, plans for the erection of such additional accommodation and it is hoped that before another year passes, a suitable playroom will be added to the existing buildings. As well as this, the question of further fire precautions was also considered, and it is expected, that these also will be completed before the end of 1953.

Miss Maclennan, Matron, Miss Macrae her Deputy and Miss Finlayson, School Teacher, are all to be congratulated, as well as the other members of the staff, for the way in which they carry out their duties and for the personal and kindly interest they take in the welfare of the children, many of whom, are reluctant indeed to go, when the time comes for them to leave the Home.

During the year 1952, the following children were cared for (Number of beds including cots, approximately 28) -

In the Home on 1st Jan. 1952	-	26
Admitted during 1952	-	115
Total cared for during 1952	-	141
Of these - Ross-shire	-	84
Other Authorities	-	57
Of the total - Health Reasons	-	52
Admitted by Children's Officer	-	89

In/

In the main, children admitted by the Children's Officer were for short periods, due to illness of the parent or for adoption. Children admitted for health reasons were for longer periods.

School Health Service.

A separate report will be issued in respect of this service for the year 1952-53.

Port Health.

During 1952, only 4 ships from foreign ports arrived at ports in the County, as against 25 in the previous year. All these produced clean Bills of Health and no special action was required.

Food Supplies etc.

See Sanitary Inspectors' Reports.

Food Poisoning.

No specific case of food poisoning was reported during the year under review. Nevertheless from time to time, general practitioners inform the Medical Officer of Health of attacks of diarrhoea and vomiting, among family groups, which although of a transient nature, suggest infection with one or other of the salmonella group, and could be considered as mild food poisonings. Immediate notification of such outbreaks only occurs when attacks are severe in character or widespread in nature.

Slaughterhouses.

As in previous years, practically all slaughtering was carried out at the four main slaughterhouses in the area. Early in 1952, consideration was given to the admission of "casualties" to these slaughterhouses and separate records are now kept in respect of such animals for scrutiny by the Veterinary Surgeons or Medical Officer of Health, as required.

Generally speaking, no animal, ill from any cause, except as a result of some mechanical factor (such as a recent injury) should be brought into a slaughterhouse for slaughter. Ill animals should be seen at the farms concerned by the Veterinary Surgeons and dealt with there.

NUMBER OF ANIMALS SLAUGHTERED

	Classes of Animals	Slaughtered	Wholly Condemned	Partially Condemned	Weight (in lbs.) of Condemned meat etc.
Dingwall	Cattle	1,597	18	19	15,984
	Sheep	12,988	28	17	2,850
	Calves	326	7	1	397
	Pigs	241	6	-	833
Invergordon	Cattle	348	2	11	1,899
	Sheep	2,696	32	13	1,776
	Calves	96	5	1	348
	Pigs	80	1	3	407
Tain	Cattle	512	12	5	9,166
	Sheep	3,294	30	22	3,240
	Calves	157	1	-	34
	Pigs	108	-	4	108
Stornoway	Cattle	1,161	6	14	)
	Sheep	17,851	14	15	) 17,249
	Calves	1,470	2	-	)
	Pigs	185	-	-	)

NATIONAL/

National Assistance Act, 1948. (See Chief Welfare Officer's report)

As in previous years, Mr. Macdonald, Chief Welfare Officer, supervised the working of the above Act. There is in the area, only one Home, registered for the admission of old persons. This Home which is privately owned, was run satisfactorily.

During 1952, four persons were notified to the Medical Officer of Health, as being persons in need of care and attention and who should be removed to an Institution, even although they themselves refused to accept such assistance. In two of these cases the Medical Officer issued certificates to allow the necessary action to be taken.

Nursing Homes Registration (Scotland) Act.

There are no Homes in Ross-shire registered under the above Act.

Report on the Standing Advisory Committee on Local Authority Services.

The above report which was circularised in 1952, gives consideration to the Local Authorities Health Services and makes suggestions under six main headings.

(a) Reduction of deaths in the first 45 years of life.

(b) Lessening illness in the first half of life.

(c) Reducing disease and postponing death in second half of life.

(d) Mental Health.

(e) Health Education.

(f) Statistical Investigation.

The report also draws attention to the temporary lack of appreciation of the preventive medical services.

As far as Ross-shire is concerned, much has been done under the first three headings. Whooping-cough vaccination has been carried out in the County for several years now. Diphtheria immunisation is also actively engaged in, tuberculosis contact examinations arranged and also B.C.G. vaccination. "School Leavers" are also given special attention, and wherever possible tuberculin testing, B.C.G. vaccination and X-ray examination performed. Attempts are being made to link closer the Public Health Department, the General Practitioner and the District Nurse, as detailed elsewhere in this report.

Improvements must be along the above lines and must be based, in the main, on the influence of the District Nursing Sister as a Health Visitor in her area. The importance of the District Nursing Sisters as Health Visitors is perhaps overshadowed by her purely nursing responsibilities, but as more nurses become available and districts rearranged to lessen these responsibilities, then the nursing sister will be able to engage more actively in Health Visiting and to co-operate more closely with the family doctor, who must be considered as the basic person in all preventive measures.

As regards Mental Health and Health Education, here also, especially in a rural area, the importance of the closer linking up of the three main "field" services, i.e. the General Practitioner Service, the Nursing Service and the Public Health Service, is all important, for the usual urban methods of mass suggestion, fail to have in a rural population, the lasting effect of a personal approach by those familiar to the persons concerned.

In the field of Statistical Investigation, the County is deficient because of lack of staff, especially clerical staff, but in spite of this it is hoped that under this heading and also under the heading of Research, some contribution may yet be made.

NATIONAL ASSISTANCE ACT, 1948.

Report by Chief Social Welfare Officer for year ending 31st December, 1952.

The Establishments managed by the Local Authority for residential and temporary accommodation in accordance with Section 21 of the National Assistance Act 1948 at Arthurville House, Tain, and Coulregrein House, Stornoway, have been well maintained and excellently run under the charge of the respective Governor and Matron. The average number accommodated was 53 and 52 respectively.

Residential accommodation is still very far short of requirements and the fact that no provision has yet been made by the Northern Regional Hospital Board for the taking over of the chronic sick at present occupying beds in the Local Authority Residential Homes makes the position further acute. Pending the completion of the improvements of Arthurville House which restricted the accommodation, arrangements had to be made with Inchbae House, Garve, which is registered under the National Assistance Act (Registration of Homes (Scotland) Act 1948) for the admission of a number of persons requiring care and attention. These persons would normally have been admitted to Arthurville House.

The Regional Hospital Board had promised to make some arrangement during the year for the chronic sick but so far they have made no headway.

Raddery House, Rosemarkie, was offered as a gift to the County Council and the question of whether it might be suitable as an Old Persons' Home had been enquired into but unfortunately on account of its remoteness and other allied difficulties the project had to be abandoned.

In regard to the new Old Persons' Home at Gairloch some difficulties arose in regard to the site but they have now been got over and the plans for the Home have now been finalised by the Department of Health for Scotland it is hoped that the building of the new Home will be commenced during the course of the following year.

The improvements being carried out under the comprehensive scheme for Arthurville House, Tain, are now nearing completion. The central heating is now installed and working very satisfactorily. This is proving a great boon to the residents. The staff quarters are also completed and the whole building is in the course of being redecorated.

The question of the erection of temporary hutted accommodation for staff at Coulregrein House was again brought before the Welfare Committee and in view of the attitude previously expressed by the Department of Health for Scotland in regard to doing anything to Coulregrein House which would perpetuate its use as residential accommodation, it was agreed that technical officers of the Department of Health should visit Coulregrein House and meet the House Sub-Committee.

The meeting took place towards the end of December when it was agreed that the provision of additional accommodation for staff should not be pressed but that the sum which had been allowed for re-surfacing the roads and footpaths should be reduced to a minimum and the savings used for improving the standards of accommodation within the house. Improvements to the kitchen and lavatory accommodation were already in progress. It was also suggested that a comprehensive scheme of painting and redecorating and refurnishing of the Home should be put forward including the renewal of floor coverings and the provision of new curtains.

It was not necessary to provide temporary accommodation for persons rendered homeless through unforeseen circumstances.

In/

In connection with the preparation of a scheme for the provision of the welfare of the deaf and dumb, a meeting of Northern Local Authorities was held in Inverness with representatives of the Dundee Inverness and Northern Welfare Association for the Deaf and Dumb with a view to coming to a joint arrangement for the carrying out of the provisions of the National Assistance Act 1948 in this direction. The meeting was a very successful one and it was agreed that an arrangement should be made whereby the Association mentioned should carry out on behalf of the Local Authorities the welfare provisions in regard to deaf and dumb and arrangements were being made to have a draft scheme submitted to the Department of Health for Scotland.

With regard to the Scheme for the Welfare of Handicapped Persons other than the blind and deaf and dumb, a survey of the number of persons who will be required to be provided for was still in the course of being completed at the end of the year.

An Old People's Week organised by the Scottish Old People's Welfare Committee was held in October. One of the main objects was to enlist support from Organisations interested in the welfare of the old to recruit voluntary workers and to form Old People's Welfare Committees. As a result such a Committee was formed in Stornoway and is now doing very good work in connection with the visiting of the old people. The Dingwall Ladies' Association was also doing very valuable work in the same direction.

Compulsory Removal Orders under Section 47 of the National Assistance Act 1948 were necessary in the case of a man from Stornoway and Cromarty.

The provisions of Section 48 of the Act have been complied with in connection with the care of property of persons admitted to hospital etc.

The joint arrangement with the Northern Counties Institute for the Welfare of the Blind carries on in a very satisfactory manner.

The Chief and District Social Welfare Officers continue to act as Authorised Officers under the Mental Health Scheme in connection with certification, removal of mental patients and payment of guardian allowances. Certifications during the year numbered 33.

The number of certified patients being admitted to mental hospitals is steadily decreasing. The number last year was the lowest on record.

The number of mental patients as at 31st December was as follows:-

Boarded-out Lunatics under guardianship	48
Boarded-out Mental Defectives under guardianship	46
Mental Defectives in Residential Accommodation	9
Mental Patients on Probation	7

HOME HELP SCHEME.

The Scheme so far as taken advantage of is working very satisfactorily and while there was an increase in the number of domestic helps employed there has not been the demand for such helps as might have been anticipated. It can only be re-iterated that the main reason why the Scheme is not being utilised to a fuller extent is the fact that a stranger is not desired in the household and experience has certainly borne this out. It must also, however, be mentioned that where a home help has been recruited through the service, either for a few hours daily or weekly, appreciation has been expressed of the service rendered. Financial assistance had to be given in most of the cases.

The number of domestic helps enrolled was 23 and of these, seven were employed during the year in connection with applications in respect of 15 cases. The average period of assistance was 8 weeks.

CHILDREN'S/

CHILDREN'S ACT 1948.

Report by Children's Officer for year ending 31st December, 1952.

I beg to report that during the year ended 31st December 1952, the Local Authority received 13 children into care. Those children had either no parents or guardians or the parents or guardians were prevented by reason of mental or bodily infirmity or other circumstances from providing for their proper accommodation, maintenance and upbringing; it being in the interests of their welfare in all the cases, that the Local Authority intervened and took charge of them, as laid down in Section 1 of the above Act.

On 31st December 1952 there were 100 children in care. Of these 56 were under School Leaving Age, boarded out either with relatives or foster parents in the County;

1 was boarded out with Guardians with a view to adoption;
21 were over School Leaving Age and in regular employment;
2 were over School Leaving Age, but not employed;
17 were boarded out in other Counties and supervised by the respective Authority;
2 were in Aberlour Orphanage and
1 was in Dr. Barnardo's Homes.

Throughout the year 31 children came out of the care of the Local Authority:-

14 were taken over by their parents or guardians;
16 attained 18 years of age and
1 died in Hospital.

9 children belonging to other Authorities were boarded out in this County and supervised by this Department.

43 children were taken into the temporary care of this Authority and admitted to the Seaforth Home, Maryburgh. This was due in most cases to the mothers being taken into Hospital, mainly for confinement, and there being no one to look after the family.

In addition to the above there were 13 babies placed by their Mothers for adoption - 3 of whom were afterwards withdrawn from the Adoption List; their Mothers, after the six weeks' period had elapsed, having decided to keep them. Adoptions have been arranged for 9 of the babies and there is 1 baby in the Seaforth Home, Maryburgh, still awaiting adoption.

4 Children were placed by other Authorities for adoption and 8 private adoptions were carried through in the County during the year. All these adoptions were supervised by this Department, homes etc. visited and reports lodged in Court.

In October of this year 2 offenders under The Children & Young Persons (Scotland) Act 1937 were placed by the Sheriff on Remand, and were accommodated in the Remand Home provided by Mr. Kenneth Macleod, Church Street, Dingwall. Those were the first cases placed there since the Remand Home accommodation was obtained in March 1951. The Committee appointed Dr. P.D. Thomson, Dingwall, Medical Officer.

ANNUAL REPORT FOR THE YEAR ENDING 31st DECEMBER, 1952,
BY THE SANITARY INSPECTOR & HOUSING OFFICER, (MAINLAND).

Water Supplies

Although the annual figures for rainfall and sunshine were only slightly below average yet nevertheless unusual weather conditions prevailed. For instance severe frosts and snow in January and early February were followed by a mild spring and rather cool summer. Autumn was probably the coldest of the century and yet there had been only very slight snowfall when the year closed.

At Muir of Ord (Fairburn) the dryest month was April with 1.52 inches of rainfall followed closely by July (1.57) and May (1.61). August had a rainfall of 4.02 inches followed by 4.57 in October which was the wettest month of the year.

The following are rainfall figures recorded at some representative places throughout the County during the year:-

	Rainfall in 1952	Average	Difference from Average
Tain (Tarlogie)	23.51	29.0	- 5.49
Muir of Ord (Fairburn)	33.53	38.56	- 5.03
Beauly (Monar)	40.44	67.5	-17.06
Stornoway	44.66	47.35	- 2.69
Achnashellach	84.67	79.90	+ 4.77
Glenquoich	107.23	110 75	- 3.52
Kinlochquoich	112.84	119.3	- 6.46
Stromeferry	55.18	68.03 +	-12.85

+ Short term average only.

Examination of Water Supplies.

During the year, 42 samples of water from private sources were submitted for chemical and bacteriological examination. Fourteen samples were taken for bacteriological examination only. Twenty-nine samples were found to be chemically and bacteriologically satisfactory, eleven were satisfactory from a chemical standpoint, but were outwith the bacteriological limits prescribed for a potable water. Two samples were bacteriologically satisfactory but gave an unsatisfactory chemical analysis. Of the 14 samples submitted for bacteriological examination only eight were pronounced satisfactory. Each case was individually considered and the owner advised as to what steps should be taken to improve matters.

Complaints.

No complaints were received regarding existing public water supplies, with the exception of the Logie Easter/Barbaraville supply, which had to be augmented by pumping water direct from the Balnagown river, the supply being chlorinated before use.

New Supplies.

With regard to new water schemes, it is interesting to note from the County Water Engineer's Report that some 220 new service connections were made during the year on the mainland of the County. However, large areas, some of them fairly thickly populated, are still without a satisfactory public water supply and from a Public Health point of view no effort should be spared in providing wholesome water wherever it is needed. The County Council is pressing forward with its Regional Schemes but it must be remembered that the speed of completion of such schemes is in part, governed by the overruling authority of the Department of Health for Scotland.

Drainage and Rivers' Pollution.

Existing drainage systems continued to function satisfactorily during the year. New drainage schemes are under construction at Plockton, Shandwick, Hilton, Duirinish and Ardgay. Whenever possible, service connections are being made to these new sewers as the work proceeds. A strict watch continues to be kept on the methods of sewage disposal and wherever possible the/

the treatment of this sewage by septic tank, or otherwise, is strongly advised before discharge into any water course including the sea. Indeed, when ground conditions permit and the effluent is not too large, a request is usually made to discharge the treated sewage into the land either through sumps or fireclay tiel spreader drains, thus ensuring maximum purification of effluent before it reaches any water course.

Scavenging.

The collection and disposal of household refuse from the special scavenging districts throughout the County continues to be carried out by private Contractors. In spite of efforts made by this Department, the poor conditions mentioned in my report of last year still prevail. At Evanton, the refuse tip which by all reasonable standards has been "full" for the past five years, has encroached upon the adjoining woodland and is building up in an alarming manner. The collection here is by horse and cart so that by reasons of time and cost, load carrying distances must of a necessity be comparatively short. Negotiations have been going on all through the year under review but a site has not been obtained, even at the time of writing although there are at least three plots of waste land which would be quite suitable for use as properly controlled tipping sites.

The difficulties of obtaining sites arising in this, and many similar cases throughout the Country, raises the question as to whether the Local Authorities' powers of compulsory acquisition should not be extended to include the purchase of land for refuse disposal.

Complaints.

A complaint was received regarding the condition of the refuse tip at Kyle of Lochalsh which, unfortunately, is within a short distance of the school. Although conditions at this tip are by no means perfect, reasonable efforts are being made to make the best use of what is virtually the only suitable tipping place available.

New Areas.

During the latter part of the year an attempt was made to organise refuse collection by private bargain from the hamlets of Newhall and Jemimaville. While a scavenging service is essential to these hamlets the formation of Special Districts is out of the question as even the cost of advertising the formation of such districts would make the scavenging rate very high, unless this cost was spread over a number of years. These schemes will be economical only if every householder participates in them, and, although full agreement has not yet been reached, it is hoped to start refuse collections in the near future.

Nuisances.

During the year, only eight offences within the meaning of Section 16 of the Public Health (Scotland) Act, 1897 were brought to the notice of this Department. The number is small, but the assortment is as usual varied - animal carcases 3: indiscriminate dumping 2; choked drains 2; defective conditions of house 1. Two of the three carcases were dead seals found on the foreshore and were buried at Local Authority expense. One case of indiscriminate dumping was discovered at a Hydro Electric Works' Contractors' Camp. No provision had been made for the disposal of kitchen refuse and the camp was littered with an accumulation of ashes, tins, papers and decaying vegetable matter. However, when the matter was brought to notice the Camp Boss and Contractor responded quickly, a suitable refuse pit was dug, a small brick incinerator built and the camp area was cleared up. There are no less than eight Hydro Electric Scheme Camps scattered throughout the County, each camp having anything up to 300 men. They are well controlled, satisfactorily clean and in spite of the large numbers of persons who, of necessity, must live together, no infectious epidemic has so far arisen.

Of/

Of the two nuisances consisting of choked drains, one was quickly removed, but the other, of which intimation was made to the authors in mid December, still existed at the end of the year. Some small repairs have been carried out, but they have not been sufficient to effect the proper removal of the Nuisance. The matter is being pursued.

Offensive Trades.

The only "Offensive Trade" carried on, on the Mainland of the County is the Knackery at Alcaig, Conon Bridge, which continues to be operated in a most inoffensive manner. Work has been proceeding with the installation of the digester plant and, meantime, carcases are skinned, quartered and dispatched in sealed containers to the Company's Knackery at Loanhead, Midlothian.

Public Conveniences.

There are five public conveniences in the landward area of the County, two of which have been provided by private bodies. All conveniences are maintained in a satisfactory manner, with the exception of that at Gairloch Pier. It is hoped that conditions here, will improve.

Conveniences are still required at Muir of Ord, Evanton and Conon Bridge, but the cost, which would have to be covered by the Special Scavenging rates, seems to be the deterring factor.

Burial Grounds.

During the year under review the old burial ground at Kishorn was closed on the recommendation of this Department. The extension to the burial ground at Strathconon was completed and that at Ullapool was nearing completion as the year closed. Plans for the extensions at Clachendarroch and Annat burial grounds have been approved.

Factories.

It was possible to inspect only a few Factories during the year. The total number of Factories on the Register (Mainland), remains as 198, of which 144 are "mechanical"; 22 are "Non-mechanical" and 28 are family concernes, exempted from many of the requirements of the Act. During the year, seven cases, where Sanitary Conveniences were insufficient or lacking in cleanliness were noted and in four of these cases, conditions have been improved. The standard of cleanliness in one bakehouse, left much to be desired. The premises concerned are very old and continued visitations are being made.

Shops Act.

As in the case of Factories, the inspection of shops had to be considerably curtailed during the year. This work has to be carried out in conjunction with sampling under the Food & Drugs (Adulteration) Acts and in no instance was any flagrant contravention of the Act discovered. Once again the need for Regulations controlling the methods of manufacture, storage and sale of foodstuffs must be stressed. Discussions on this subject have been going on for at least four years, and inspite of the urgent pleas by many Local Authorities for such legislation nothing so far has materialised.

Milk & Dairies.

Among Tuberculin Tested Producers the general standard of cleanliness in milk production remains satisfactory, and this is confirmed by the results of samples of milk taken under this designation. Of the 417 samples of Tuberculin Tested milk taken during the year only 35 failed to meet the required standard. Milk from non-designated producers was submitted to the same tests but with of course less satisfactory results. Forty-one of the 168 samples taken were outwith the limits of either coliform or bacteriological count prescribed for Tuberculin Tested milk.

Producers/

Producers in the County holding Tuberculin Tested licences now number thirty-three. The increase over last year is due to one producer being upgraded from the non-designated section and two entirely new producers starting off with Tuberculin Tested licences. There are still ten-non-designated - or "Ordinary" producers in the County (Mainland) Area.

Producers:

T.T.	33
Non-designated	10
Total	43

Producers/Retailers:

T.T.	-

Retailers:

Certified	1
T.T.	2
Pasteurised	2
Non-designated	8

In addition to the above figures one Producer holding a Certified Licence in Inverness-shire has been issued with a supplementary licence to sell Tuberculin Tested milk to certain Hydro Electric Workers' Camps in the County.

With the exception of the two Producer Retailers on the Black Isle, all other milk producers sell their milk in bulk to the North of Scotland Milk Marketing Board's Depots at Tain, Dingwall and Inverness.

The undernoted figures give a comparative indication of the gallonage of milk handled by the Board's two Depots at Tain and Dingwall.

	1950	1951	1952
Tain:-			
T.T.	181,313	210,210	246,130
Ord.	60,131	50,419	50,745
Total	241,444	260,630	296,875
Dingwall:-			
T.T.	285,003	304,612	389,733
Ord.	30,083	36,549	300,199
Total	315,086	341,161	689,932

In addition to the above figures, 2,100 and 71,815 gallons of "Ordinary" milk were imported to Tain and Dingwall Dairies respectively.

Improvements.

At Easter Templands an existing byre has been gutted and reconstructed along modern lines to form a single headed dairy byre and an adjoining store has been divided and formed into a dairy scullery and milk store.

An existing building containing calf pens at Scatwell Farm has been converted by the new proprietor to form an additional double headed dairy byre.

The new dairy holding at No.5 Balnagore, Fearn, was completed early in the year. While these premises are built along modern lines and incorporate portal truss supported roof and 3'0" wide grips, the layout of the premises could be improved. The dairy and byre are at opposite extremities of the steading, an arrangement which is not likely to make for immediate cooling of the milk. The unsuitability of this arrangement for dairying purposes was pointed out to the Department of Agriculture prior to constructional work commencing. One lesson learned during the erection of these premises is that a joiner-made window is preferable to the usual type of steel frame window for use in the milk store. The quadrant opener of a steel framed window projects inwards while the opening part of the window projects outwards so that/

that fly-proof wire gauze, as required by the Dairy Byelaws, cannot be fitted in a simple and satisfactory manner to either side. The only permanent method devised, so far, to overcome this difficulty is the fitting, on the outside, of a box shaped wooden frame, large enough for the window to open outwards - a costly arrangement. A joiner made window having the top third hinged and opening inwards so that gauze can be securely fitted over the outside of the opening part, is simple and easily operated for cleaning purposes.

Bovine Tuberculosis.

Forty-two instances of carcases infected with tuberculosis were reported to the Sanitary Inspector by the Medical Officer of Health for investigation. The number during the previous year was seventy-three.

Seventy-four samples of milk, including samples taken in connection with the above investigations were submitted for biological examination for tuberculosis. All samples were reported negative.

It is worthy of note that the percentage of attested cattle in the County continues to rise steadily and has now reached approximately 40% as compared with 21.6% at the end of 1951.

Housing.

Undernoted is a table showing housing progress during the year under review:-

General Needs Housing.

Site	Total Allocation	Total completed up to 31.12.52.	Total completed during 1952.	Number under construction.
Alness	44	34	2	-
Avoch	36	34	24	2
Ardgay	8	-	-	-
Balintore	20	10	-	10
Conon Bridge	42	32	6	10
Davidston	6	-	-	6
Dornie	6	-	-	-
Evanton	45	27	-	-
Edderton	10	-	-	10
Garve	9	9	9	-
Goanies	6	-	-	6
Garguston	6	-	-	-
Gairloch	10	10	-	-
Kyle	51	20	-	-
Kildary	8	-	-	8
Lochcarron	8	8	-	-
Maryburgh	20	20	10	-
Muir of Ord	38	20	-	18
Plockton	6	-	-	-
Strathpeffer	30	18	8	-
Pitcalnie	6	-	-	6
Saltburn	10	-	-	-
Ullapool	38	20	-	18
Kessock	1	1	1	-
Fearn	4	-	-	-

The Local Authority was advised that as from February, 1952, no further houses would be built specifically for Agricultural Workers. However, Agricultural Workers' houses have already been erected by the Local Authority at Barbraville (6); Fearn (8); Kildary (4); Marybank (4); Munlochy (8); Newhall (6); making a total of 36 four apartment houses.

The total permanent (general needs) houses built in the post war period is now 263, sixty of which were completed during 1952, while 94 houses were at various stages of construction as the year closed.

In/

In some areas the demand for Council houses appears to be as high as ever, but in certain villages the number of applicants is dwindling, although from a Public Health point of view a considerable number of houses are required to replace existing unfit houses. When the 1953 housing programme has been completed the majority of applicants in poor housing conditions in the landward area of the County should be rehoused. The work of replacing these unfit houses occupied by persons who for financial reasons have never applied for Council houses, will then have to be tackled. Along with this, there is the rather difficult problem of rehousing families from the five squatters' camps scattered throughout the County.

Housing (Scotland) Act, 1950, Section 111. (Improvement of Houses).

The response to the offer of financial assistance under the above Act has not been what was anticipated. It was popularly understood that Housing (Scotland) Act, 1950 (originally 1949), was to be a replacement of the Housing (Rural Workers') Act, but when it appeared in its final form it was found that "tied" houses were not covered by the Act, unless the proprietor agreed to "untie" the house. This condition was not popular with owners of "tied" houses, which are, in the main, farm servants' cottages, with the result that only a few owner occupiers took advantage of the grant. **There was also the restriction that the cost of the works must lie between £100 and £600.**

It is anticipated, however, that there will be amending legislation which would allow tied houses to qualify, and in view of this, many proposed improvements to farm cottages have been suspended, pending the amendment.

The following table indicates the progress during the year.

APPROVED			REFUSED			COMPLETED			VALUE		
1950	1951	1952	1950	1951	1952	1950	1951	1952	1950	1951	1952
3	10	10	2	1	1	-	3	8	-	£1290.12/-	£3956.6.4d.

Building Licensing.

Undernoted are details of expenditure authorised by the Local Authority under Building Licensing (Defence Regulations) as delegated to them by the Central Department:-

Type	No. Licences	Cost
New Houses	48	£134,445.
Repairs and Improvements	90	£ 79,766.10.1d.

Food.

Unsound Food.

It will be noted from the undermentioned table that the quantities of various foodstuffs condemned under Section 43 of the Public Health (Scotland) Act of 1897 is somewhat less than during the previous year.

	Fresh Meat	Canned Meat	Canned Milk	Canned Fruit	Various
1951	124 lbs.	799 lbs.	51 lbs.	418 lbs.	828 lbs.
1952	87 lbs.	227 lbs.	22 lbs.	583 lbs.	703 lbs.

Ice-cream Regulations.

Five new applications for registration under this heading were granted during the year, bringing the total to Premises 40; Vans 5.

Six premises are registered for the manufacture of ice-cream and two for manufacture from "cold mix" only. Thirty-eight samples were submitted for bacteriological examination and fifteen of these were found to be outwith the prescribed limits. Twenty samples were submitted for chemical analysis and two of these were found to be substandard. The matter was brought to the attention of the seller.

Food/

Food and Drugs Adulteration Act, 1928.

Undernoted is a table showing samples taken during the year:-

Article	Landward Area	Dingwall Burgh	Tain Burgh	Invergordon Burgh
Barley	1	-	1	-
Baking Powder	-	-	1	1
Custard Powder	3	1	2	-
Cocoa	1	-	-	-
Coffee and Chicory	1	-	1	1
Chutney	-	1	1	-
Dried Soup Mixture	-	-	-	1
Drinking Chocolate	1	-	1	-
Dried Sago	1	-	-	-
Fish Paste	-	-	1	-
Ground Almonds	1	-	-	-
Gravy Salt	-	1	1	1
Jam	1	-	-	-
Milk	57	73	27	2
Meat Paste	-	1	-	-
Mustard	2	-	1	1
Marmalade	1	-	1	-
Malted Milk Powder	-	-	-	1
Mixed Vegetables	2	-	-	-
Mixed Herbs	1	-	-	-
Nescafe	2	-	-	-
Pepper	-	-	2	-
Pickle (Mixed)	2	1	1	2
Rice	1	-	-	-
Salad Cream	2	-	-	-
Sausages	-	1	-	-
Sandwich Spread	1	-	-	-
Sauce	-	1	-	-
Salt	-	-	1	-
Tinned Vegetables	1	-	-	-
Table Jelly	2	-	-	-
Tonic Food	1	-	-	-
Tomato Sauce	2	-	2	-
Vinegar	2	-	-	-
Whisky	3	5	-	-
Whipping Paste	1	-	-	-
Zinc Ointment	1	-	1	-

Of the 235 samples taken, 14 samples, all of milk, did not comply with the prescribed standards.

Planning.

The day to day administration of the technical aspects of Town & Country Planning Acts (including the Building Byelaws), continues to be dealt with by the Housing Officer's Department. During the year 190 consents were issued, in which total are included, many distribution lines for the North of Scotland Hydro Electric Board.

The unsatisfactory state of buildings declared redundant by the Services still remains, though to a lesser degree.

Alness.

The redevelopment of the Back Street area of Alness referred to last year has gone a step further with the acquisition of the ground, except for one feu where legal obscurities regarding the actual ownership still hold up progress.

Ullapool./

Ullapool.

The boom fish landings in Ullapool still present problems which are slow to be solved. One of these, however, has reached a satisfactory stage, viz. stances for fish curers carrying out their operations. The co-operation of the Proprietor of Ullapool Estate, the Local County Councillor, and the District Council has resulted in a site being agreed on at West Terrace for stances, and these have been let to various firms. This has enabled the area earmarked for a lorry park to be cleared. A few isolated stances were also arranged at Morefield.

A proposal by the Herring Industry Board to erect a Fish Meal Reduction Factory in Ullapool raised a degree of controversy as to site, although it was generally agreed that such a factory would be an asset to the fishing industry locally and to the National Economy in reduction of unnecessary transport of some materials. Objections by one or two parties has prevented the fixing of a definite site so far.

The formation of a lorry park has been agreed to in principal by the County Council. There appears to be no doubt that the provision of a Bye-law to enforce lorry drivers to use this park will be essential.

No further progress has been made regarding the provision of a permanent block of offices for the Fish Trade at the Pier Head and bound up with this is the question of Fish Box Stances, which have been the cause of complaint.

Kyle of Lochalsh.

After some delay, due to the presence of requisitioned private buildings at the base of the New Pier Site, access was finally obtained for the contractors and work on the new pier is proceeding satisfactorily. An extension and improvement to the pier for the Kyle-Kyleakin Ferry has also been carried out, but it is felt that it did not go far enough to prevent the traffic congestion which occurs at the peak periods.

The creditable efforts by the Local people to create their own recreation ground is progressing steadily.

Loch Ewe Area.

This year saw a determined effort by the County Council in conjunction with a private individual to make a concrete contribution towards the re-habilitation of the Highlands. Under the Planning Acts the Local Authority utilised their powers to build a small factory at Inverasdale, which was let to Mr. John Rollo, Engineer, St. Andrew's Works, Bonnybridge. Mr. Rollo engaged four local men who were trained to operate a cutting machine and lathes and they were set to work in the factory at Inverasdale on the type of work which enabled them to break off as local circumstances of planting and reaping required. The Factory has a supply of power from the Kerry Falls Station at Gairloch and the opening ceremony was carried out by the Rt. Hon. Thomas Johnstone.

Mr. Rollo was also responsible for a visit during the Spring of a number of volunteers who cultivated and planted out a number of crofts belonging to local people who were unable to do the work themselves, due to age or some physical disability. The volunteers returned in the Autumn and helped with the harvesting of the crops. All this work was done in conjunction with a Local Advisory Committee and the spirit of co-operation was excellent throughout.

Burgh of Dingwall.

The controversial subject of the reliever road was further discussed on many occasions during the year, Dingwall Town Council maintaining its stand against the proposal and strongly advocating the "ring road". No definite decision was reached

In/

In their need for Housing Sites, Dingwall Town Council suggested that land adjoining the Academy should be used. The County Council, as Planning Authority and Education Authority,took exception to this use of land which had been designated as open space or for Educational use. At a friendly meeting on the site between representatives of the County and Town Councils, the latter agreed to drop their proposal if alternative sites, now outwith the Burgh, were put at their disposal and incorporated in the Burgh. It was agreed to submit this recommendation to the County Council, virtually for an extension of the Burgh Boundaries.

REPORT FOR YEAR ENDING 31st DECEMBER, 1952
BY MILK OFFICER. ------ over

REPORT FOR YEAR ENDING 31st DECEMBER, 1952
BY MILK OFFICER.

Milk Officers' Conference.

In December a Milk Officers' Conference was held at Ayr, where the County Council very kindly lent a room in their offices for the meeting. Papers were read on "The composition of Milk and Factors affecting it"; "The Milk Officers' work from the Producers' angle"; "Coliform contamination of Farm Milks" and "Recent Developments in dairy farm equipment". An interesting visit was also paid to Auchincruive Dairy College where some time was spent in the Dairy Research Department and Dairy School.

Milk & Dairies (Scotland) Act, 1914.

During the year regular visits were paid to all dairies registered under the above Act to check their methods of production and cleanliness of utensils. Where the standard falls below that required, more frequent visits are paid.

Milk (Special Designations) Order (Scotland) 1936-49; 1951; 1952.

Three new licences to produce Tuberculin Tested milk were issued under the above Orders, all to new producers. This brings the total number of Tuberculin Tested producers in the County to thirty-three, with ten registered undesignated producers left. No undesignated producers have upgraded to Tuberculin Tested since last year, a rather disappointing result.

During the year three hundred and sixty four routine samples were taken from designated producers and submitted to bacteriological examination under the above Orders. Another twenty-one were taken from dealers; twenty-five from schools and eight from the milk supplied to Invergordon Hospital.

The milk from undesignated producers and dealers was also sampled regularly and submitted to the same tests as are the samples of Tuberculin Tested milk.

The standards with which Tuberculin Tested milk must comply are:- A colony count not exceeding 200,000 per m.l. (approximately 1/30 of an ounce), and B.coli absent in 0.01 m.l. This is a very lenient standard. Certified milk must have a colony count not exceeding 30,000 per m.l. and B.coli absent in 0.1 m.l. Pasteurised milk when submitted to a phosphatase test shall give a reading not exceeding 2.3 lovibond blue units and have B.coli absent in 0.01 m.l.

The following table shows the numbers of samples under the different designations and the number of failures:-

Designated Milks

Source of Supply	T.T.		T.T. (Schools)		Certified		Pasteurised	
	Taken	Failed	Taken	Failed	Taken	Failed	Taken	Failed
Producers' Supplies	364	30	6	-	-	-	-	-
Dealers' Supplies	18	3	18	2	3	-	4	-
Hospital	8	-	-	-	-	-	-	-

Undesignated Milks/

Undesignated Milks

Source of Supply	No. Taken	No. Failed
Producers' Supplies	130	32
Dealers' Supplies	38	9

All the failures from designated producers came from producers who had only one or two failures. There were no consistently bad producers during the year.

Of the failures from non-designated producers, thirteen of the thirty-two were due to two consistently bad producers.

Seventy-four samples from undesignated producers were submitted for biological examination by the routine guinea pig method. No positive results were shown.

ANNUAL REPORT FOR THE YEAR ENDING 31st DECEMBER, 1952,
BY THE SANITARY INSPECTOR & HOUSING OFFICER,
SCHOOL BUILDINGS, FRANCIS STREET, STORNOWAY.

Water Supplies.

The Eye Peninsula Water Scheme continues to make progress. The laying of mains in Contract No.2 has been completed and it is expected that a start will soon be made on Contract No.3. A large number of services have been completed and the occupants of some 600 houses in rural Lewis now enjoy the benefits of a pressure water supply. There appears to be a certain amount of dissatisfaction amongst the public in the areas affected, regarding delay in obtaining individual connections from the mains, but it should be appreciated that with the existing labour available in Lewis, progress on the whole is surprisingly good.

No further complaints have been received regarding other sources of supply, with the exception of Back Swedish houses. This supply is most unsatisfactory and it is felt that the position will be further aggravated when the fourteen houses at present under construction become ready for occupation. It is felt that an alternative supply should not be difficult to find as there appears to be substantial source of spring water in the vicinity.

The rainfall for 1952 was 44.58 inches, being 5.32 inches below the average for Lewis of 49.9 inches per annum.

Drainage.

The drainage system at Holm Road was completed during the year and is working satisfactorily. All the house drains in the vicinity have connected up to the sewer. It is indeed welcome information that a complete drainage scheme for the village of Sandwick has been finally approved. This is the first major advancement in sanitation in rural Lewis, and it is to be hoped that Sandwick is merely a beginning. There have been a very large number of septic tanks constructed throughout the Island, and many more are still to come; but, at best, they can only be regarded as a temporary measure until such time as adequate sewerage can be provided.

Housing.

The Council's housing schemes at Plasterfield, Lochs/Cleascro and Back continue to make excellent progress and it is hoped that a large proportion of these will be ready for occupation during the coming year.

There are still eight houses to be occupied at the Springfield Scheme and it is anticipated that they too will soon be completed.

The Swedish timber houses throughout the Island appear to have benefited to some extent from the measures recently taken to prevent excessive dampness at windows and doors, but it is now generally recognised that this type of house is unsuitable to the climatic conditions prevalent in Lewis.

On the whole the standard of cleanliness in Council built houses in Lewis is very good, although there is the inevitable very small proportion of tenants whose ideas of cleanliness fall short of everybody's standard but their own.

The following are figures showing the number of privately built/

built houses erected, and under course of construction, in Lewis during the post war period:-

Assisted Houses - Housing (Scotland) Act, 1952 & Agriculture (Scotland) Act, 1948.

No. of houses completed	187
No. of houses under construction	129

Un-assisted Houses.

No. of houses completed	60
No. of houses under construction	13

Four Certificates "A" were issued during the year, all to crofters in the Uig district.

Four Certificates "B" for improvements were issued during the year in terms of Section 111 of the Housing (Scotland) Act, 1950, and a further three applications were approved under the same section of the Act.

Five Building Licences were issued during the year in respect of privately built dwelling houses, and four in respect of improvements to existing dwelling houses.

Nuisances.

The usual minor nuisances were successfully dealt with during the year, by private visitation.

Dairies & Milk Supplies.

Routine sampling has been carried out during the year with generally satisfactory results. At Mossend Farm, one biological sample produced a positive result, but, on further investigation, by taking samples from each animal in the herd, it proved to be a false alarm, as the analyst's reports were, without exception, negative. It is a matter of conjecture as to how the positive result became apparent in the first place.

So far Messrs. D. MacBrayne Ltd. have not acted upon this Department's suggestion that cold storage should be provided for the accommodation of milk. It is felt, that apart from cold storage, special provision should be made for the storage of the milk containers, separate from other goods and distant from the cattle pens below deck. There are more than 500 gallons of milk shipped daily to Stornoway from the Mainland and it would appear only proper that an improved method of handling such a large and regular supply of easily contaminated foodstuff, should be evolved. This is accentuated by the fact that about 2,500 school children partake of this milk. The matter is being continued with the transport company.

It is interesting to note at this stage that there is now a definite decline in the number of milking cows kept in the rural areas of Lewis where the Milk to Schools Scheme operates. The milk supplier for these areas - Tolsta and the Eye Peninsula in particular - has built up a substantial milk round amongst the agricultural population in the process of supplying the schools. It is rather early as yet to produce any definite statistics in regard to this matter, but the trend is there and the day may well come when Lewis will be almost wholly dependent on the Mainland for her milk supplies.

The condition of the local dairy farm premises remains much the same as in previous years, and there appears to be a great amount of reluctance on the part of the Stornoway Trustees to carry out improvements necessary to bring these places up to the standard required by the County Bye-laws.

Ice Cream./

Ice Cream.

Only three informal samples were taken during the year, two of which were below the prescribed standards, especially in respect of fat content. The reason for such a small number of samples being taken was the delay in deciding whether legal proceedings should be taken with regard to future samples, but it is fully expected that sampling will be considerably intensified during the coming year. It appears to be a difficult matter to impress on these people the necessity of conforming to the minimum fat content, etc., as laid down in the Ice-cream Regulations. A comparatively new product known as "ice lollies" and sold by the local ice-cream manufacturers, is now very popular, especially with children. Manufacturing is carried out by pouring diluted fruit juice into suitable moulds, a lollipop stick inserted, and then reduced to freezing point or below. It is doubtful whether these "ice lollies" are produced under ideally hygienic conditions but unfortunately there does not appear to be any effective method of control over their manufacture at the present time.

Food & Drugs.

All samples taken during the year were found to be genuine.

The following foodstuffs were certified as unfit for human consumption, during the year:-

Tinned Meat	Tinned Milk	Other Tinned Foods	Non-Tinned Foods
165 lbs.	277 lbs.	949 lbs.	2446 lbs.

Factories.

Routine inspections were carried out and no faults of a serious nature were discovered. The aerated waters factory premises at 44 Habost, Ness, have now been completed.

Public Health (Meat) Regulations.

Private slaughtering has not yet been resumed in Lewis, all slaughtering being carried out at the cental slaughterhouse in Stornoway.

The following table gives details of animals slaughtered and condemnations carried out during the year:-

Class of Animal	Total Slaughtered	Weight in lbs. Condemned Meat	Weight of Tinned Meat Condemned
Cattle	1,161		-
Sheep	17,851	17,249	-
Pigs	185		-
Calves	1,470		54

Infectious Diseases.

Apart from several disinfections carried out in respect of scarlet fever, and tuberculosis, there is nothing further to report so far as the subject affects this department.

REPORT FOR YEAR ENDING 31st DEC. 1952,
BY WATER ENGINEER.

Existing Water Works.

The year was characterised by a prolonged deficiency of rainfall, particularly in the eastern part of the County where the rainfall for ten months was below average, the actual deficiency over the year amounting to 20 per cent. Although supply became critically low in a number of the Council's schemes, including Logie Easter, Barbaraville, Conon Bridge, Evanton and Kyle, only in the case of Logie Easter and Barbaraville was the supply actually interrupted. In this case there was a serious shortage from mid-summer right on to the end of the year and it was necessary to install an emergency supply by pumping and chlorinating water direct from the Balnagown River. This emergency source was in operation from the beginning of October until December and prevented a complete breakdown in the area.

There were a few minor cases of inadequate supply in parts of other areas, but these were mostly overcome by waste detection, etc.

Existing Drainage Schemes.

These functioned satisfactorily throughout the year, the only minor trouble being at Bridgend of Alness where trouble was experienced on several occasions as a result of chokage of the main sewer.

New Water Works.

Progress on the Council's major regional schemes for the Easter Ross area and for the Eye Peninsula was disappointing, the delay in the former case being mainly due to the difficulties encountered in acquiring water rights at Loch Glass.

New works carried out during the year included a supply to the Morangie and Tarlogie area, minor extensions of the Easter Ross scheme, a supply in the Nostie area and the completion of the second section of the Eye Peninsula scheme. In the latter case a satisfactory supply has not yet been made available to the Aignish and Swordale areas owing to difficulties with the trunk main which have still to be dealt with by the Council's Consulting Engineers. The scheme for the Ardgay, Lower Gledfield and Kincardine areas was virtually completed by the end of the year and ready to put into supply as soon as a supply was available from Sutherland County Council. The scheme for the Gairloch area was also started in the autumn and considerable progress had been made by the end of the year.

Improvement schemes were also carried out at Conon Bridge, Ullapool, Evanton, Barbaraville and Logie Easter.

During the year a total of 479 new service connections were made, 258 of these being in the Eye Peninsula and the remainder on the mainland, mostly in Easter Ross. The total number of service connections which has now been made to the Council's new schemes is over 700, representing a public water supply being made available to a population of approximately three thousand.

New Drainage Schemes.

New drainage schemes were completed during the year at Holm Road, Stornoway, and Balintore. Although a considerable number of connections have been made to the latter, it is not yet functioning satisfactorily and has not yet been taken over from the Consulting Engineers. In addition, the drainage scheme for Plockton was almost completed and a considerable number of properties in the village connected to it.

A start was made on drainage schemes for Shandwick, Hilton, Duirinish and part of Ardgay.